

DEPARTMENT POLICY

POLICY # 204	SUBJECT: Departmental Quality Improvement Process
EFFECTIVE DATE: November 17, 2004	PAGE 1 of 3
AUTHORIZED SIGNATURE:	

DEPARTMENTAL QUALITY IMPROVEMENT REVIEW PROCESS

I. Purpose

In order to comply with Delaware Code C. 90, Title 29; to establish a Department system for quality improvements, and to adhere to the requirements of DSCYF Policy #201, Integrated Service Planning, the Department of Services for Children, Youth and Their Families (DSCYF) engages in a Department-wide quality review process to improve all levels of care management.

State statute mandates a semi-annual review of case plans be completed by the Division of Family Services, the Division of Child Mental Health Services, and the Division of Youth Rehabilitative Services for children and their families who are currently receiving services. For cases requiring an Integrated Service Plan (ISP), service plans are reviewed every 90 days by the direct service divisions in compliance with DSCYF Policy #201, Integrated Service Planning.

II. Policy

This policy provides a means to certify and document that internal Review and Quality Assurance methods are consistent with the Department's legal mandate, federal requirements, case management best practices in a System of Care, DSCYF Report Card Measures, and a comprehensive overview of all elements that touch on opportunities for quality improvements.

The Office of Case Management Quality Improvement Review Unit will conduct periodic reviews for the purpose of assuring these requirements.

III. Scope of Reviews

- A. Respective direct service divisions within the Department comply with a variety of their own internal review and quality assurance mechanisms and professional standards as well as federal mandates to meet performance requirements.
- B. Office of Case Management Quality Improvement Reviews:

The Office of Case Management Quality Improvement Review Unit will complete reviews of a specified sample of division and/or interdivisional cases on a monthly basis.

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Reviews will be guided by the protocols listed in this policy. Information will be gathered from FACTS data and site visits to allow examination of all aspects of respective division services. Reports will be sent to the relevant division(s) regarding the results of each individual review. The results will be a compilation of review findings regarding specific components of the cases sampled. Reports will include recommendations for improvement opportunities, if applicable. A tracking system for the reviews and attending improvement opportunities and time lines will be maintained by the Quality Improvement Review Unit and the Quality Assurance representatives from each division. These designated representatives will be the coordination/communications link with the OCM Quality Improvement Review Unit and their respective divisions.

The Quality Improvement Review Unit may also forward review findings to the Department Safety Committee for review. The Department Safety Committee contains representatives from all divisions and may at its discretion recommend an Independent Review or Root Cause Analysis (RCA).

The Quality Improvement Review Unit will publish a semi-annual report and score card on the progress of implementation of recommended improvements.

C. Selective Reviews:

At the request of the Cabinet Secretary or a Division Director, a review of services involving a child in the custody of or under the supervision of the Department is conducted by OCM Administrative Reviewers. Findings and recommendations are made in a written report to the Secretary or Division Director and may be shared with the OCM Quality Improvement Review Unit for future monitoring of quality improvement efforts.

D. Root Cause Analysis Reviews:

At the request of the Secretary and upon the event of a Critical Incident of a child in the custody of or under the supervision of the Department, an Independent Review or Root Cause Analysis is convened per DSCYF Policy #211, Root Cause Analysis (forthcoming).

E. Department Safety Reviews:

The Department Safety Committee (DSC) may receive referrals from the Quality Improvement Review Unit. Following DSCYF Policy #201, Integrated Service Planning, Section IV, Monitoring Departmental Compliance, the DSC will review findings related to the use of the ISP tool and may require corrective actions or RCA's for failure to use the ISP tool itself.

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V. Protocols:

The following protocols act as guides for areas that will be examined by the OCM Quality Improvement Reviewers. Reviews cover all activities of the Department that touch on children.

- Examines the reliability of screening or assessment tools
- Examines the reliability of case planning
- Assures the safety and stability of children
- Documents the participation in the planning by parents, children, case Managers, and other involved parties using System of Care principles
- Reviews the coordination of efforts between service divisions
- Evaluates services offered to accomplish goals of case plan
- Evaluates the extent of progress in accomplishing goals of case plans
- Tracks the DSCYF Integrated Service Plan Report Card Measure
- Enhances supervisory monitoring and coaching functions including implementation of improvements required by RCA's.
- Evaluates technical compliance with policy and procedures
- Identifies trends and communicates this information to appropriate division or Department entities. Trend data is gathered from a variety of sources including Hotline Reports, Institutional Abuse Reports, Constituent Complaints, identification of training needs, etc.
- Identifies gaps in services and programs
- Provides a mechanism for Improvement Opportunity Plans being written and executed
- Supports efforts for on-going quality improvement

V. Confidentiality

The Delaware Code, Title 31, Chapter 38, Sections 3812 and 3813, specifies what information must be shared and the confidential manner with which review information will be treated. Department reviewers will have access to case records and all pertinent information related to the child or family being reviewed. The reviewer will treat this data in a confidential manner in compliance with DSCYF Policy # 205, Confidentiality of Client Records.